

# TENNESSEE DEPARTMENT OF EDUCATION - OFFICE OF EDUCATOR LICENSING

710 JAMES ROBERTSON PARKWAY 12TH FLOOR ANDREW JOHNSON TOWER NASHVILLE TN 37243

**PRINT CLEARLY - Please use Black Ink to ensure scanned application is legible - provide full name - include any aliases**

United States SSN - required		First Name	Middle Name	Last Name	Maiden Name/other last name aliases	
Date of Birth-required	Gender	Street/P.O. Box		City	State	Zip Code
Telephone Number - include area code		E-mail address - <b>Must provide to receive notification of license issuance</b>			Cell Phone Number/Alternate Phone Number	

## INFORMATION NEEDED FOR FEDERAL REPORTING - COMPLETE BOTH ETHNICITY & RACE

1. **Ethnicity - Choose one**      Hispanic or Latino \_\_\_\_\_ Not Hispanic or Latino \_\_\_\_\_
2. **Race - Choose one or more**      American Indian or Alaska Native \_\_\_\_\_ Asian \_\_\_\_\_ Black or African American \_\_\_\_\_  
Native Hawaiian - Other Pacific Islander \_\_\_\_\_ White \_\_\_\_\_

## PLEASE READ CAREFULLY BEFORE SIGNING - MUST BE COMPLETED

**Personal Affirmation:** *Failure to complete this section will result in your application being returned without processing. False statements made in this application may constitute grounds to take action, revoke or deny a license. Check the appropriate block for each question.*

1. Have you been convicted of a felony, including conviction on a plea of guilty, a plea of nolo contendere or order granting pre-trial diversion?  
\_\_\_\_\_ YES      \_\_\_\_\_ NO
2. Have you been convicted of the illegal possession of drugs, including conviction on a plea of guilty, a plea of nolo contendere or an order granting pre-trial diversion?  
\_\_\_\_\_ YES      \_\_\_\_\_ NO
3. Have you had a teacher's certificate/license revoked, suspended or denied, or have you voluntarily relinquished a certificate/license (allowing a license expire does not apply)?  
\_\_\_\_\_ YES      \_\_\_\_\_ NO
4. Is there any action pending against your certificate/license or application in another state?  
\_\_\_\_\_ YES      \_\_\_\_\_ NO

**If you have answered "yes" to questions 1 or 2, please attach details of conviction, including date and place of conviction, and court certified copies of the judgment, conviction, and sentencing.**

**If you have answered "yes" to questions 3 or 4, attach details naming the state and/or issuing authority and explain circumstance.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## TRANSACTION (S) REQUESTED. (Check and complete following page(s) if applicable)

## CHOOSE TYPE OF INITIAL TENNESSEE LICENSE DESIRED

(THIS SECTION ONLY APPLIES TO THOSE WHO HAVE NEVER HELD A TENNESSEE LICENSE OR DESIRING ADDITIONAL LICENSE TYPE)

- \_\_\_\_\_ INITIAL LICENSE-TN Institutions Only (Apprentice, Apprentice Special Group, Beginning Administrator, or Instructional Leader )      circle one
- \_\_\_\_\_ OUT OF STATE LICENSE (Program completers outside of TN / USA or applying based upon interstate agreement)
- \_\_\_\_\_ NON-PUBLIC SCHOOL LICENSE (Employment verification required)
- \_\_\_\_\_ TRANSITIONAL LICENSE (Requires signature from TN Director of Schools and verification from approved institution/agency)
- \_\_\_\_\_ INTERIM "B" LICENSE (Requires signature from Director of Schools, and verification from Dean of Education/Certification Officer at teacher preparation institution)
- \_\_\_\_\_ INTERIM "D" LICENSE (Internship) (Requires signature of Dean of Education at teacher preparation institution)
- \_\_\_\_\_ OCCUPATIONAL EDUCATION LICENSE (Apprentice Occupational)
- \_\_\_\_\_ PERMIT (This is not a Tennessee teaching license and can only be applied for by a Tennessee Public School System)
- \_\_\_\_\_ 3 YEAR INTERNATIONAL CREDENTIAL (Requires signature from Director of Schools, nonrenewable)
- \_\_\_\_\_ JROTC LICENSE (Requires signature from TN Director of Schools)
- \_\_\_\_\_ SPEECH/LANGUAGE PATHOLOGIST OR SPEECH/LANGUAGE TEACHER OR SCHOOL AUDIOLOGIST
- \_\_\_\_\_ NATIONAL BOARD CERTIFICATION

## ADVANCEMENT TO APPRENTICE LEVEL OR PROFESSIONAL LEVEL LICENSE

**ONLY APPLICABLE IF HELD A PREDECESSOR TENNESSEE LICENSE**

- \_\_\_\_\_ ADVANCEMENT FROM APPRENTICE LEVEL TO PROFESSIONAL LEVEL (Professional, or Professional School Service Personnel)      circle one
- \_\_\_\_\_ ADVANCEMENT FROM ALTERNATIVE "A" or ALTERNATIVE "C" OR ALTERNATIVE "E" TO APPRENTICE LEVEL (Apprentice or Out of State)      circle one
- \_\_\_\_\_ ADVANCEMENT FROM INTERIM "B" TO APPRENTICE LEVEL (Apprentice or Out of State)      circle one
- \_\_\_\_\_ ADVANCEMENT FROM INTERIM "D" TO APPRENTICE LEVEL
- \_\_\_\_\_ ADVANCEMENT FROM ALTERNATIVE "I" OR ALTERNATIVE "II" (Apprentice or Out of State or Professional)      circle one
- \_\_\_\_\_ ADVANCEMENT FROM TRANSITIONAL (Interim B, Apprentice or Professional)      circle one
- \_\_\_\_\_ ADVANCEMENT FROM APPRENTICE OCCUPATIONAL TO PROFESSIONAL OCCUPATIONAL LICENSE
- \_\_\_\_\_ CONVERSION FROM TENNESSEE TEACHING LICENSE TO SCHOOL SERVICE PERSONNEL LICENSE (Speech/Language only)
- \_\_\_\_\_ ADVANCEMENT TO PROFESSIONAL LEVEL ADMINISTRATOR LICENSE

## RENEWAL OF OR AMENDMENT TO AN EXISTING LICENSE

**ONLY APPLICABLE IF AMENDING AN EXISTING TENNESSEE LICENSE**

- \_\_\_\_\_ RENEWAL OF LICENSE (Check one)
- \_\_\_\_\_ 5 Year License (Apprentice/Apprentice Special Group/Out of State)      \_\_\_\_\_ JROTC      \_\_\_\_\_ 10 Year License (Professional/Professional Special Group)
- \_\_\_\_\_ Administrator License (Beginning/Professional)      \_\_\_\_\_ 5 Year Apprentice Occupational License      \_\_\_\_\_ 10 Year Professional Occupational License
- \_\_\_\_\_ Alternative A (Speech Lang. only)      \_\_\_\_\_ Interim B      \_\_\_\_\_ Interim D      \_\_\_\_\_ Transitional      \_\_\_\_\_ National Board Certification
- \_\_\_\_\_ AMENDMENT TO ADD ADDITIONAL DEGREE TO TEACHING LICENSE (Check one of the following and attach official transcripts)
- \_\_\_\_\_ Masters Degree      \_\_\_\_\_ Master's Degree +30 semester graduate hours      \_\_\_\_\_ Education Specialist      \_\_\_\_\_ Doctorate Degree
- \_\_\_\_\_ AMENDMENT TO ADD ENDORSEMENT AREA (S) TO TEACHING LICENSE (Identify area to be added) \_\_\_\_\_
- \_\_\_\_\_ NAME CHANGE (Requires a notarized copy of the marriage license, divorce decree, or court order that has generated the legal name change) Social Security card n/a
- \_\_\_\_\_ ADDRESS CHANGE NOTIFICATION

**APPLICATION FOR INITIAL OCCUPATIONAL EDUCATION LICENSE  
OR AMENDMENT TO LICENSE**

**APPLICANT NAME** \_\_\_\_\_ **SOCIAL SECURITY NUMBER** \_\_\_\_\_

All documents submitted to the office of educator licensing become the property of the Tennessee department of education and will not be returned to the applicant; nor will the department provide copies of documents to the applicant or third parties. Incomplete applications will be returned to the applicant.

**SELECT THE ENDORSEMENT(S) FOR WHICH YOU WISH TO BE CONSIDERED**

<b>X= Selection</b>	<b>Endorsement Name</b>	<b>Endorsement Code</b>
	Collision Repair Technology	507
	Automotive Technology	508
	Aircraft Maintenance	512
	Carpentry	522
	Electricity	523
	Concrete	524
	Plumbing	527
	Drafting/CAD	531
	Graphic Communications	543
	Cosmetology	561
	Culinary Arts	562
	Leisure Craft Technology	568
	Radio/TV Broadcasting	576
	Health Science	577
	Diesel Technology	581
	Welding	584
	Legal and Protective Services	590
	Aviation Ground School	594
	Technology Infrastructure	595
	Manufacturing Technology	596
	Electronic Media	597
	HVAC	598
	Health Informatics	721
	Public Health	722
	Programming	742
	Fire Safety	751